

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>TH</i>	<i>331</i>	<i>12/15</i>
O.I.P.E. CLASSIFIER	<i>112</i>	<i>45</i>	<i>12/22</i>
FORMALITY REVIEW		<i>70619</i>	<i>12/29/93</i>

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1			
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5	✓	✓	A
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9	✓	✓	A
10	✓	✓	A
11	0	0	D
12	✓	✓	A
13	✓	✓	B
14	✓	✓	A
15			
16			
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18			
19			
20	✓	✓	A
21			A
22			A
23			A
24			A
25			A
26			A
27			A
28	✓	✓	A
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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